								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000								09152-191001				
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												771441
(Column 1) (Column 2)								TYPE		OR	SMALL	
TOTAL CLAIMS			116					RATE	FEE	1 1	RATE	FEE
FOR			NUMBER FILEO		NUMB	MBER EXTRA		BASIC FE	E 355.00	OR	Basic Fee	710.00
TOTAL CHARGEABLE CLAIMS			//6 minus 20=		. 96			X\$ 9=		OR	X\$18=	1728
INDEPENDENT CLAIMS			19 mi	nus 3 =	16			X40=		OR	X80=	1280
MU	LTIPLE DEPEN	DENT CLAIM PI					+135=		OR	+270=	1200	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	+	OR	TOTAL	37/8	
CLAIMS AS AMENDED - PART II										,	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 55	Minus	-//	6	-35		X\$ 9=		OR	X\$18=	
AME	Independent	• 0	Minus		3	4	.	X40=		ОЯ	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /						J	+135=		OR	+270=	
	امل	١٨					ı	AYOY.	 	ОЯ	YOTAL	
	1/9/0	Ψ						ADDIT. FE	E L	JOA,	ADDIT. FEE	
		(Column 1) CLAIMS		(Colu		<u>(Column 3)</u> I	1 :	_	Lagge			4001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	·Sam	Mirus		طھ	•0		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	***	C 4114			X40=		OR	X80=	
<u> </u>	PINST PHESE	NTATION OF MI	JETIPLE DEP	ENDEN	COMM		١ ا	+135=		OR	+270=	
	•	,						TOTA ADDIT. FEI		OR	YOYAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)								ADUII. PEI			ADDIT. PEE	
		(Column 1) CLAIMS		High		(Colorini S)	1 r		ADDI-	1 1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT	· ·	NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	••		•		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		a		X40⇒			X80=	
گ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
	M Managara ta activ	+135=		OR	+270=							
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE												
	The Highest Nur	ber Previously Pa	id For (Total o	Independ	ent) is the	highest numbe	er fou	and in the	ppropriate bo	x in co	lumn 1.	